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Form **990-T** | **Exempt Organization Business Income Tax Return** | OMB No 1545-0687

Department of the Treasury
Internal Revenue Service

For calendar yr 1991 or other tax yr beginning ..... ,end. .....

1991

For Paperwork Reduction Act Notice, see page 1 of separate instructions.

Please Print or Type	Name of organization **Point Foundation** Number, street, and room or suite no. (If a P.O box, see instructions.) 27 Gate Five Road City or town, state, and ZIP code Sausalito, California 94965	A **Employer identification no.** (Employee's trust, see instructions) **94-2147154** B Unrelated business activity codes (See instructions for Block B) 7389

C Check box if address changed . . . > ☐ D Exempt under section > 501 (c) (3) OR ☐ 408(e)

E Check type of organization . . . > ☒ Corporation ☐ Trust ☐ Sec 401a trust ☐ Sec. 408a trust

F Group exemption number (see instructions for Block F) >

> If the unrelated trade or business gross income is $10,000 or less, complete only p. 1 and Part III on p. 2, and sign return.

> If unrelated trade/business gross income is over $10,000, complete all applicable parts of form (except lines 1 thru 4 on p. 1)

Taxable Income	1 Unrelated trade or business gross income (state sources > Mailing list & advertisi)		1	21,860
	2 Deductions (including net operating loss) (see instructions)		2	17,732
	3 Unrelated business taxable income before Specific deduction (line 1 minus line 2)		3	4,128
	4 Specific deduction (see instructions)		4	1,000
	5 Unrelated business taxable income (line 3 minus line 4 or enter amount from line 33, page 2. If line 4 is greater than line 3, enter the smaller of -0- or line 3.)		5	3,128
Tax Computation	**Organizations Taxable as Corporations** (see instructions for tax computation) 6 Controlled group members (sections 1561 and 1563) - Check here: ☐ and: a Enter your share of $50,000 and $25,000 taxable income bracket amounts (in that order): (i) ☐ (ii) ☐ b Enter your share of the additional 5% tax (not to exceed $11,750) ☐			
	7 Income tax on the amount on line 5		7	469
	Trusts Taxable at Trust Rates (see instructions for tax computation) 8 Income tax on the amount on line 5 from: ☐ Tax rate sched ☐ Sch D (F1041)		8	0
Tax and Payments	**All Organizations** (see instructions) 9a Foreign tax credit (corporations attach Form 1118; trusts, Form 1116)	9a 0		
	b Other credits (see instructions)	9b		
	c General business credit - Check if from: ☐ Form 3800 ☐ Form (specify) >	9c 0		
	d Credit for prior year minimum tax (attach Form 8801 or 8827)	9d 0		
	10 Total (add lines 9a through 9d)		10	0
	11 Line 7 or line 8 minus line 10		11	469
	12 Recapture taxes. Check if from: ☐ Form 4255 ☐ Form 8611		12	0
	13a Alternative minimum tax ..... 0 b Environmental tax 0		13c	0
	14 Total tax (add lines 11, 12, and 13c)		14	469
	15 **Payments:** a 1990 overpayment credited to 1991	15a		
	b 1991 estimated tax payments	15b 500		
	c Subtotal (add lines 15a and 15b)	15c 500		
	d Tax deposited with Form 7004 or Form 2758	15d 0		
	e Foreign organizations - Tax paid or withheld at source (see instructions)	15e		
	f Other credits and payments (see instructions)	15f 0		
	16 Total credits and payments (add lines 15c through 15f)		16	500
	17 Penalty for underpayment of estimated tax. Check > ☐ if Form 2220 is attached		17	0
	18 **Tax due --** If the total of lines 14 and 17 is larger than line 16, enter amount owed		18	0
	19 **Overpayment -** If line 16 is larger than the total of lines 14 and 17, enter amount overpaid		19	31
	20 Enter the amount of line 19 you want: Credit to '92 est. tax > **Refunded >**		20	31

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, to best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or fiduciary | Date | Title

Paid Preparer's Use Only

Preparer's Signature	Date	Check if self-employed > ☐	Preparer's SSN
Firm's name and address		E.I. No. >	
		ZIP code >	

Part I Unrelated Trade or Business Income (See instructions on pages 6 through 9.)

1a	Gross receipts 21,860	b Less returns	c Balance >	1c	21,860
2	Cost of goods sold (Schedule A, line 7)			2	17,457
3	Gross profit (line 1c minus line 2)			3	4,403
4a	Capital gain net income (attach separate Schedule D) (see instructions)			4a	0
b	Net gain or (loss) from Form 4797, Part II, line 18 (attach Form 4797)			4b	0
c	Capital loss deduction for trusts			4c	0
5	Income (loss) from partnerships (attach statement)			5	
6	Rent income (Schedule C)			6	0
7	Unrelated debt-financed income (Schedule E, line 2)			7	0
8	Investment income of a section 501(c)(7), (9), (17), or (20) organization (Schedule F)			8	0
9	Interest, annuities, royalties, and rents from controlled organizations (Schedule G)			9	0
10	Exploited exempt activity income (Schedule H)			10	0
11	Advertising income (Schedule I, Part III-A)			11	0
12	Other income (see instructions for line 12 - attach schedule)			12	
13	TOTAL - Unrelated trade or business income (add lines 3 through 12)			13	4,403

Part II Deductions Not Taken Elsewhere

(See instructions on pages 9 through 11 for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule J)			14	106 / 0
15	Salaries and wages			15	551
16	Repairs (see instructions) + Maint. 5395 +			16	164
17	Bad debts (see instructions)			17	
18	Interest (attach schedule) 1488 + 227			18	54
19	Taxes (see instructions) PR taxes + taxes			19	315
20	Contributions (see instructions)			20	
21	Depreciation (attach Form 4562)	21	275		
22	Less depreciation claimed in Schedule A and elsewhere on return	22a		22b	275
23	Depletion			23	
24a	Contributions to deferred compensation plans (see instructions)			24a	
b	Employee benefit programs (see instructions) Emp benefits			24b	58
25	Other deductions (attach schedule)			25	2424 X
26	TOTAL DEDUCTIONS (add lines 14 through 25)			26	275
27	Unrelated business taxable income before allowable advertising loss (subtract line 26 from line 13)			27	4,128
28	Advertising loss (Schedule I, Part III-B)			28	0
29	Unrelated business taxable income before net operating loss deduction (line 28 from line 27)			29	4,128
30	Net operating loss deduction (see instructions)			30	
31	Unrelated business taxable income before Specific deduction (subtract line 30 from line 29)			31	4,128
32	Specific deduction (see instructions for line 4, page 1)			32	1,000
33	Unrelated business taxable income (subtract line 32 from line 31. If line 32 is greater than line 31, enter the smaller of -0- or line 31.) Enter here and on page 1, line 5			33	3,128

Part III Statements Regarding Certain Activities and Other Information

(See instructions.)

		Yes	No
1	During the tax year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)? (See instructions for exceptions and filing requirements for Form TD F 90-22.1.) If "Yes," write the name of the foreign country here >		X
2	Was the organization the grantor of, or transferor to, a foreign trust that existed during the current tax year, whether or not the organization had any beneficial interest in it? If "Yes," the organization may have to file Forms 3520, 3520-A, or 926.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year >		

SCHEDULE A - COST OF GOODS SOLD (See instructions for line 2 on page 6.)

Method of inventory valuation (specify) >

1	Inventory at beginning of year	1	1575 0	6	Inventory at end of year	6	1575
2	Purchases	2	17,457	7	Cost of goods sold. Subtract line 6 from line 5. Enter here and on line 2, Part I.	7	17,457
3	Cost of labor	3		8	Do rules of sect. 263A (with respect to property produced/acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
b	Other costs (attach schedule)	4b					
5	TOTAL-Add lines 1 through 4b	5	17,457				

The books are in care of > Telephone number > (000)000-0000

SCHEDULE C - RENT INCOME FROM REAL PROPERTY & PERSONAL PROPERTY LEASED WITH REAL PROPERTY (see instructions for line 6 on page 7)

1. Description of property	2.Rent received or accrued	3. % of rent for personal prop
NOT APPLICABLE		

4. Complete for any item if the entry in col. 3 is more than 50%, or if the rent is based on profit or income		5. Complete for any item if the entry in column 3 is more than 10% but not more than 50%		
(a) Deductions directly connected	(b) Income includible (column 2 minus column 4(a))	(a) Gross inc. report (c2xc3)	(b) Deduction directly connected with personal property	(c) Income includible (col 5(a) minus col 5(b))
	0	0		0
	0	0		0
	0	0		0
	0	0		0
	0	0		0

Total (Add columns 4(b) and 5(c). Enter total here and on line 6, Part I, page 2) 0

SCHEDULE E - UNRELATED DEBT-FINANCED INCOME (see instructions for line 7 on page 7)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight-line depreciation	b) Other deductions
1 NOT APPLICABLE			

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Percentage which col. 4 is of col. 5	7. Gross inc. reportable (col 2 x col 6)	8. Allocable deductions (col 6 x total of col 3a & 3b)	9. Net income (loss) includible (col 7 minus col 8)
		0.00%	0	0	0
		0.00%	0	0	0
		0.00%	0	0	0
		0.00%	0	0	0

2 Total (enter here and on line 7, Part I, page 2) 0

3 Total dividends-received deductions included in column 8 . . . . .

SCHEDULE F - INVESTMENT INCOME OF A SECTION 501(c)(7), (9), (17), OR (20) ORGANIZATION (see instructions for line 8 on page 8)

1. Description of income	2. Amount of income	3. Deductions directly connect	4. Net investment income (column 2 minus column 3)	5. Set-asides (attach schedule)	6. Bal. of investment income (col 4 - col 5)
			0		0
NOT APPLICABLE			0		0
			0		0
			0		0

Total (enter here and on line 8, Part I, page 2) 0

SCHEDULE G - INTEREST, ANNUITIES, ROYALTIES, AND RENTS FROM CONTROLLED ORGANIZATIONS (see instructions for line 9 on page 9)

1. Name and address of controlled organization(s)	2. Gross income from controlled organization(s)	3. Deduction of controlling organizations directly connected with col. 2 income	4. Exempt controlled organizations		
			(a) Unrelated business taxable income	b) Taxable income computed as though not exempt under sec. 501(a) or amount in col. (a) whichever is more	(c) % which col. a is of column b
					0.00%
NOT APPLICABLE					0.00%
					0.00%

5. Nonexempt controlled organizations			6. Gross inc. reportable (col 2 x 4c/5c)	7. Allowable deductions (col 3 x 4c/5c)	8. Net income includible (c 6 minus col 7)
(a) Excess taxable income	(b) Taxable income, or amount in col a, which is more	(c) % which A is of B			
		0.00%	0	0	0
		0.00%	0	0	0
		0.00%	0	0	0

Total (enter here and on line 9, page 2) 0

SCHEDULE H - EXPLOITED EXEMPT ACTIVITY INCOME, OTHER THAN ADVERTISING INCOME

(see instructions for line 10 on page 9)

1. Description of exploited activity	2. Gross unrelated bus. income from trade/business	3. Expenses directly connected w/ product. of unrelated bus inc	4. Net income from unrelated trade/business (col 2 - col 3)	5. Gross inc. from activity that is not unrelated bus. inc.	6. Expenses attributable to column 5	7. Excess exmpt expenses(col 6 minus col 5, but not > col 4)	8. Net income includible (col 4 - col 7)
			0			0	0
NOT APPLICABLE			0			0	0
			0			0	0
Total (enter here and on line 10, Part I, page 2)							0

SCHEDULE I - ADVERTISING INCOME AND ADVERTISING LOSS

(see Instr. for line 11 on pg 9)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or loss (col 2 - col 3) If col2> col3, comp. 5,6 & 7. If col3 > col2, enter loss in P. III-B.	5. Circulation income	6. Readership costs	7. If col 5 >= col 6, enter in PartIII-A col b the gain from col 4. If col. 6> col5 enter in Part III-A col.b the gain from gain from subtracting col. 6 plus col.3 from col.5 plus col. 2. For a loss, see instr. for line 11 item 2c.
NOT APPLICABLE						
Total	0	0	0	0	0	0

Part II Income From Periodicals Reported on a Separate Basis

			0			0
			0			0
			0			0
			0			0
			0			0
			0			0
			0			0
			0			0

Part III-A Advertising Income		**Part III-B Advertising Loss**	
a) Enter consolidated periodical or names of nonconsolidate periodic.	b)Enter tot amt from col 4/7, Prt I, & amts list in col 4/7, Prt II	a) Enter consolidated periodic./ names of nonconsolidate per.	b) Enter tot amount from col 4, Prt I, & amts list in col 4, Prt II
Enter total here and on line 11, Part I, page 2	0	**Enter total here and on line 28, Part II, page 2**	0

SCHEDULE J - COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

1. Name	2. Title	3. % of time devot. to bus.	4. Compensation attributable to unrelated business
Stewart Brand	Director	Part-time	None 1061
Kelly Teevan	Director & Exec Director of Point Foundation	Full-time	None
Doug Carlston	Director	Part-time	None
Robert Fuller	Director	Part-time	None
Christina Desser	Director	Part-time	None
Peggy Lauer	Director	Part-time	None
Total (enter here and on line 14, Part II, page 2)			0